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Atty Docket No. 021331-000710US

PTO FAX NO.: 703-872-9306

ATTENTION: Examiner Sandra M RAYFORD

Group Art Unit 1772

OFFICIAL COMMUNICATION
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EXAMINER SANDRA M. RAYFORD

CERTIFICATION OF FACSIMILE TRANSMISSION

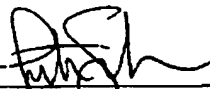
I hereby certify that the following documents in re Application of Raymond Wellman, et al., Application No. 10/765,707, filed January 26, 2004 for SLIP COLLAR are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal Form (1 page)
2. Status Request (1 page)

Number of pages being transmitted, including this page: 3

Dated: June 20, 2005



Katherine Farkas

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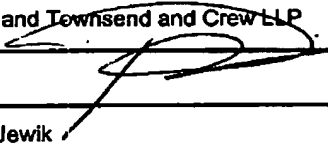
TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, CA 94111-3834
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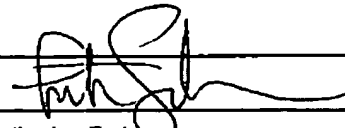
60519554 v1

PTO/SB/21 (09-04)

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/765,707	
	Filing Date	January 26, 2004	
	First Named Inventor	Wellman, Raymond	
	Art Unit	1772	
	Examiner Name	Sandra M RAYFORD	
Total Number of Pages in This Submission	3	Attorney Docket Number	021331-000710US

ENCLOSURES <small>(Check all that apply)</small>		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Patrick R. Jewik		
Date	June 20, 2005	Reg. No.	40,456

CERTIFICATE OF TRANSMISSION/MAILING			
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Signature			
Typed or printed name	Katherine Farkas	Date	June 20, 2005

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Attorney Docket No.: 021331-000710US

On 6/20/05

TOWNSEND and TOWNSEND and CREW LLP

By:

Katherine Farkas

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Wellman, Raymond

Application No.: 10/765,707

Filed: January 26, 2004

For: SLIP COLLAR

STATUS REQUEST

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

To date, Applicants have not received an Office Action on the merits.
Please advise us on the status of this application.

Respectfully submitted,



Patrick R. Jewik
Reg No. 40,456

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